



Application No. (if known): 10/706,854

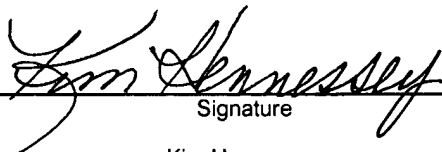
Attorney Docket No.: 15115/095001

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Telephone Number

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Fee Transmittal (1 page)

Two Month Request for Extension of Time Under 37 CFR 1.136(a) (2 pages)

Request for Continued Examination Transmittal (1 page)

Reply Under 37 CFR § 1.116 (7 pages)

Payment by credit card. Form PTO-2038 is attached (1 page)

Charge \$1,240.00 to credit card

Postcard



FEE TRANSMITTAL For FY 2006		Complete if Known		
		Application Number	10/706,854-Conf. #6547	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	November 12, 2003	
		First Named Inventor	Hironori Sanada	
		Examiner Name	B. Rojas	
TOTAL AMOUNT OF PAYMENT		Art Unit	2832	
(\$)		1,240.00	Attorney Docket No.	15115/095001

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 50-0591 Deposit Account Name: Osha · Liang LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
6	- 20 =	x	=			
HP = highest number of total claims paid for, if greater than 20.						
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
1	- 3 =	x	=			
HP = highest number of independent claims paid for, if greater than 3.						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 =	/50	(round up to a whole number) x	=

4. OTHER FEE(S)

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 1252 Extension for response within second month	450.00
1801 Request for continued examination (RCE) (see 37 ...)	790.00

SUBMITTED BY

Signature	<i>T. Chyan Liang</i>	Registration No. (Attorney/Agent)	33,986	Telephone	(713) 228-8600
Name (Print/Type)	Jonathan P. Osha		<i>T. Chyan Liang #48,885</i>	Date	April 14, 2006